

ATTACHMENTS

23 PAGES

STATE OF MONTANA DEPARTMENT OF CORRECTIONS
MSP ☒ MWP ☐ CONTRACT FACILITY: _____
DISCIPLINARY INFRACTION REPORT / NOTICE OF HEARING

(Information and staff signatures on this form must be legible)

MAJOR ☒ MINOR ☐

Inmate Name: Whitford, Makneeyapee ID # 3015941
Last name First Name
Date: 12-8-21 Time: 0700 Place of Incident: H5U-1
Room/Cell: U0-5 Housing Unit: H5U-1 Job Assignment: L.P. 801
Infraction Number(s) & Name(s): 4102- Possession of a weapon

Staff Witness: 1. _____ Other Inmates involved 1. _____
2. _____ 2. _____

Description of Violation: (who, what, why, where, when and how): ON THE ABOVE DATE
and Time, I UIM A. Graham conducted an investigation
and found that on 11-5-21 inmate whitford was in
possession of a home made weapon (shank) that was
found by staff.

REPORTING STAFF MEMBER: UIM A. Graham UIM A. Graham
(Print Name) (Sign Name)

Supervisor Review: _____
(Print Name) (Sign Name)

Inmate Status: ☒ Pre-Hearing Confinement ☐ Release to Previous Status ☐ Other

Approval for placement in PHC: ☐ Medical: _____ ☐ Mental Health: _____

Reason: Possession of a weapon

I have reviewed this report for legibility, completeness, correctness of charge, and to ensure all necessary information is attached (evidence, incident/witness reports, etc.) For placement in Pre-Hearing Confinement, I have reviewed the impact that restrictive housing may have on medical and mental health conditions exhibited, considered alternatives to placement in restrictive housing, and have determined that separation from the general inmate population is necessary due to the above mentioned reason.

C. Miller
(Shift Supervisor's Signature)

12/8/21
(Date)

(Warden or Designee Signature)

(Date)

NOTICE OF HEARING/PREHEARING ACTION

I have received a copy of this notice and have been informed of my right to attend and present evidence at a hearing.

- Hearing Date: 12/11/21 Time: 0900 hrs. Place: RHU
- I understand the charge(s)? ☐ Yes ☐ No (if no, verbally explain the charge(s) to the inmate).
- I waive my right to a hearing? ☐ Yes ☐ No (if yes, have inmate sign an Agreement/Waiver/Refusal form)
- Present evidence and witnesses on my behalf: ☐ Yes ☐ No If inmate has witnesses, have him/her complete a Witness Request form
- Other pertinent notations: _____

I understand, if found guilty, I will be subject to imposition of the sanctions as outlined in the institutional inmate disciplinary operational procedure.

(Staff Signature)

(Date & Time)

(Inmate's Signature / ID#)

STATE OF MONTANA DEPARTMENT OF CORRECTIONS
MSP ☒ MWP ☐ CONTRACT FACILITY: _____
DISCIPLINARY INFRACTION REPORT / NOTICE OF HEARING

(Information and staff signatures on this form must be legible)

MAJOR ☒

MINOR ☐

Inmate Name: WHITFord , Makneeyapee ID # 3015941
Last name First Name
Date: 12-8-21 Time: 0700 Place of Incident: HSU-1
Room/Cell: 4D-5 Housing Unit: HSU-1 Job Assignment: L.P. 801
Infraction Number(s) & Name(s): 4102- Possession of a weapon

Staff Witness: 1. _____ Other Inmates involved 1. _____
2. _____ 2. _____

Description of Violation: (who, what, why, where, when and how): ON the above date and time I UM A Graham conducted an investigation and found that on 11-5-21 inmate WHITFord was in possession of a home made weapon (shank) that was found by staff.

REPORTING STAFF MEMBER: UM A Graham UM A [Signature]
(Print Name) (Sign Name)

Supervisor Review: _____
(Print Name) (Sign Name)

Inmate Status: ☒ Pre-Hearing Confinement ☐ Release to Previous Status ☐ Other

Approval for placement in PHC : ☐ Medical: _____ ☐ Mental Health: _____

Reason: Possession of a weapon

I have reviewed this report for legibility, completeness, correctness of charge, and to ensure all necessary information is attached (evidence, incident/witness reports, etc.) For placement in Pre-Hearing Confinement, I have reviewed the impact that restrictive housing may have on medical and mental health conditions exhibited, considered alternatives to placement in restrictive housing, and have determined that separation from the general inmate population is necessary due to the above mentioned reason.

[Signature]
(Shift Supervisor's Signature)

12/8/21
(Date)

(Warden or Designee Signature)

(Date)

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- I waive my right to a hearing? ☐ Yes ☒ No (if yes, have inmate sign an Agreement/Waiver/Refusal form)
- Present evidence and witnesses on my behalf: ☒ Yes ☐ No If inmate has witnesses, have him/her complete a Witness Request form
- Other pertinent notations: _____

I understand, if found guilty, I will be subject to imposition of the sanctions as outlined in the institutional inmate disciplinary operational procedure.

[Signature]
(Staff Signature)

12/8/21 @ 1145
(Date & Time)

[Signature]
(Inmate's Signature / ID#)

OFFENDER/STAFF REQUEST (OSR) FORM

LC

DEC 09 2021

TO: LAW LIBRARY
(Name and title of staff person)

DATE: 12-8-21

NAME: MR. Whitford MID#: 3015941 FACILITY: MSP UNIT: R44
CELL/ROOM: # L-C-5

SUBJECT: (Briefly state your question and or concern and the solution you are requesting. Your failure to be specific may result in no action being taken. If necessary you may be interviewed in order to successfully respond to this request)

Can you please send me the
Disciplinary Self-Help Litigation Manual
AND The Regular Self-Help Litigation
Manual.

TWC

STAFF RESPONSE: (for staff use only)

Attached books
DISHLM
P.S. H.L.M

☐ Addressed Verbally ☐ Unanswered -violation of policy

DEC 09 2021

W Lubin /
(Staff Member Signature) (Job Title)

(Date)

OFFENDER/ST

TEST (OSR) FORM

TO: LAW LIBRARY
(Name and title of staff)DATE: 12-8-21NAME: MR WHITFORD, M L
CELL/ROOM: # L-C-5FACILITY: MSP UNIT: RHU

SUBJECT: (Briefly state your question and or concern and the solution you are requesting. Your failure to be specific may result in no action being taken. If necessary you may be interviewed in order to successfully respond to this request)

Can you please send me the DOC Policy
and the MSP Procedures on Disciplinary
Investigations and Disciplinary Infractions.

TWC

STAFF RESPONSE: (for staff use only)

Per policy please send copy card or be on
the indigent list

☐ Addressed Verbally☐ Unanswered - violation of policySS
(Staff Member Signature)Librarian
(Job Title)12/9/21
(Date)

INMATE: _____ AO#: _____ LOCATION: _____

HEARING CONTINUATION NOTICE #1

THIS FORM SERVES AS NOTIFICATION THAT THE HEARING(S) SCHEDULED
FOR _____ IS/ARE BEING CONTINUED UNTIL _____

FOR THE FOLLOWING REASONS: _____

Inmate Signature _____ DATED _____

Disciplinary _____ DATED _____

HEARING CONTINUATION NOTICE #2

THIS FORM SERVES AS NOTIFICATION THAT THE HEARING(S) SCHEDULED
FOR _____ IS/ARE BEING CONTINUED UNTIL _____

FOR THE FOLLOWING REASONS: _____

Inmate Signature _____ DATED _____

Disciplinary _____ DATED _____

Records (White)

Inmate (Goldenrod)

Woramy

OFFENDER/STAFF REQUEST (OSR) FORM

TO: Director of Education
(Name and title of staff person)

DATE: 12-9-21

NAME: MR. Whitford, M II
CELL/ROOM: # L-C-5

41 FACILITY: MSP UNIT: RH4

SUBJECT: (Briefly state your question and or concern and the solution you are requesting. Your failure to be specific may result in no action being taken. If necessary you may be interviewed in order to successfully respond to this request)

I sent an OSR to the law library requesting certain policies: Disciplinary Investigation, Disciplinary Policy, procedure, etc.

The librarian came in and delivered books to me but said that I needed a copy card to get copies of policy & procedure.

I am on the Detention Block which doesn't allow tablets or any other way to get policy or procedure. Request to Unit staff and apparently the library fall on deaf ears.

This is the third time that I've had to address this issue. Each time I win. Then each time I return to Detention this happens again. I need access to Policy & Procedure and Case law which is a right.

STAFF RESPONSE: (for staff use only)

It responded

Copy Card / Indigent List !!

☐ Addressed Verbally

☐ Unanswered - violation of policy

SS

(Staff Member Signature)

Librarian

(Job Title)

12/13/21

(Date)

OFFENDER/STAFF REQUEST (OSR) FORM

TO: 1ST Shift Sgt.
(Name and title of staff person)

DATE: 12-10-21

NAME: MR. Whitford, M ID#: 3015941 FACILITY: MSP UNIT: RHU
CELL/ROOM: # H-C-5

SUBJECT: (Briefly state your question and or concern and the solution you are requesting. Your failure to be specific may result in no action being taken. If necessary you may be interviewed in order to successfully respond to this request)

I'm trying to get ahold of DOC Policy 3
Procedure concerning Investigations, Disciplinary
Procedure and Classification?

It is in order to prepare for my Disciplinary
Hearing and/or Classification if the Ad ses
me.

STAFF RESPONSE: (for staff use only)

You will need to kite the library for this. They
will print it out and send it to you in the
mail.

Respectfully
Sgt. [Signature]
(Staff Member Signature)

☐ Addressed Verbally ☐ Unanswered - violation of policy

Sergeant
(Job Title)

12/15/21
(Date)

OFFENDER/STAFF REQUEST (OSR) FORM

DEC 13 2021

TO: Law Library
(Name and title of staff person)

DATE: 12-12-21

NAME: MR. Whitford, Mark ID#: 305941 FACILITY: MSP UNIT: R44
CELL/ROOM: # L-C-5

SUBJECT: (Briefly state your question and or concern and the solution you are requesting. Your failure to be specific may result in no action being taken. If necessary you may be interviewed in order to successfully respond to this request)

Can you send me?

1.) Case Law - Sira v Morton, 380 F3d 57, 78 (2nd Cir. 2012)
McCollum v. Miller, 695 F2d at 1048.

2.) Policy 3 Procedure on Disciplinary Hearing Process
and Disciplinary Investigations and Classifications
for Ad-Seq.

3.) HB 763 (House Bill)

You cannot charge people in Detention Blocks for
copies of legal materials and Policy 3 Procedure. Talk to
Wendy Zuber 3 Educational Director 3 DOC Legal.

STAFF RESPONSE: (for staff use only)

— Per MSP Policy 5.3.2
— Before Copies will be
— made, you must either have a

— Per MSP Policy 5.3.2
— Before Copies will be

☐ Addressed Verbally

☐ Unanswered - violation of policy

SS
(Staff Member Signature)

Librarian
(Job Title)

12/13/21
(Date)

305941

Given to
Hearing Officer
12-14-21

Received
Back 12-16-2021
with photos 1 of 4

DISCIPLINARY HEARING STATEMENT BY
MAKUEEYAPPE D. WHITFORD
3015941

MAJOR INFRACTION : 4102 - POSSESSION OF
A WEAPON

DATE & TIME OF INCIDENT : Approx. 11-15-2021 @ 1915h

DATE & TIME OF INFRACTION REPORT & NOTICE :
12-8-2021 @ 0700hrs

REPORTING STAFF : Unit Manager, Graham

STATEMENT

1. Notice : The notice provided inadequate facts in order to allow me to provide a full defense, identify relevant evidence, and to even prepare a defense.

Specifically, there was not enough "general information" concerning the confidential information in the Notice. In fact there was no general information or summary of the confidential information in the Notice.

Because of this, the Notice did not present enough factual information to connect me to the infraction charged. Without enough information to charge me for the alleged conduct in the NOTICE the infraction must fail. (Please see 9 page OSR sent to disciplinary on 12-11-21 regarding the

notice.) (The question posed was "how exactly was I personally in possession of this weapon, as opposed to this weapon being tied to my window for some unspecified amount of time?") (Facts included)

2. Documentary and Physical Evidence.

I requested copies of all backreports and incident reports and pictures, video, etc. I was given one incident report and that was of Yo Taniel when he searched the conex area and found the weapon. I also requested any and all documentation that would otherwise be available under Public Disclosure laws.

Specifically, I requested information pertaining to searches of the conex area and the last time it was searched and how often it was searched because Yo Taniel said it was a "routine" search and also to determine if the area had been searched since I had been in that cell since I had only been there a short time.

I needed these documents to prepare a defense.

As for physical evidence, I'm requesting to see the weapon that I am alleged to have possessed.

Also asked for Policy 3 Procedure, HB 263 & other Law.

3. Assistance With Defense.

I requested assistance due to the complexity of

this case in regards to the confidential information.

4. Standards of Proof I asked to see policy 3 procedure and HB 763 due to the new standard of proof which I believe is, or might be, the same as the preponderance of evidence standard of proof, or better. I needed that to figure it out. So far I haven't received it. I also wrote to ask.

5. Confidential Information. I ask that the security concerns be disclosed and specified. Also, that the reliability of the information be double checked. And, that any information that doesn't ~~be~~ identify or otherwise put the institution or people in jeopardy be disclosed.

6. Legal Materials and Policy 3 Procedure
For preparation I requested legal materials, law, policy 3 procedures, and an assistant in order to prepare a defense and was denied them. Also requested video & photo's.

7. Freedom of Religion. There is a six-month clear conduct stipulation that is imposed each and everytime I receive a major infraction which

basically punishes me for practicing my religion, and/or makes my religion and the ability to practice it a sanction. This violates my right to freedom of religion. And in turn makes this infraction illegal or at least the sanctions.

RH 4920

DISCIPLINARY HEARING DECISION

MAJOR ☒

MINOR ☐

Inmate's Name: Walters, Mark ID # 301594 Date: 12/14/2021
Infraction Number(s) & Name(s): 4110a Possession of Weapon

☒ I DO UNDERSTAND THE VIOLATION ☐ I DO NOT UNDERSTAND THE VIOLATION - ADDITIONAL ACTION TAKEN

Continuance granted to Date: 1/1/2022 By: _____

Reason: _____

Plea: ☐ Guilty ☒ Not Guilty ☐ Other: _____

Inmate's Statement: _____

I have been on the E. since I did not get any information that I reported. I have now how long that thing was put there. I was only in that cell for a short period of time.

Evidence Provided: _____

Findings: ☒ Guilty of # 4110a ☐ Not Guilty of # _____

Evidence Relied On: _____

Infraction Report / Photos / Inmate - Court Decision Reports

For Sanction Purposes: [Circle the number of prior Major/Minor Infraction Reports: 1 2 3 4 5] 7 Grid Level to Use: 3
(Circle number of prior guilty decisions within the timeframe [not each rule violation]. Find grid level to use by adding current & prior guilty decisions).

Sanction(s): 30 Days Detention Credit for 17 Days

End 01/06/2022

Reason(s) for findings: _____

Offender was in possession of a sharpened instrument / weapon

[Signature]

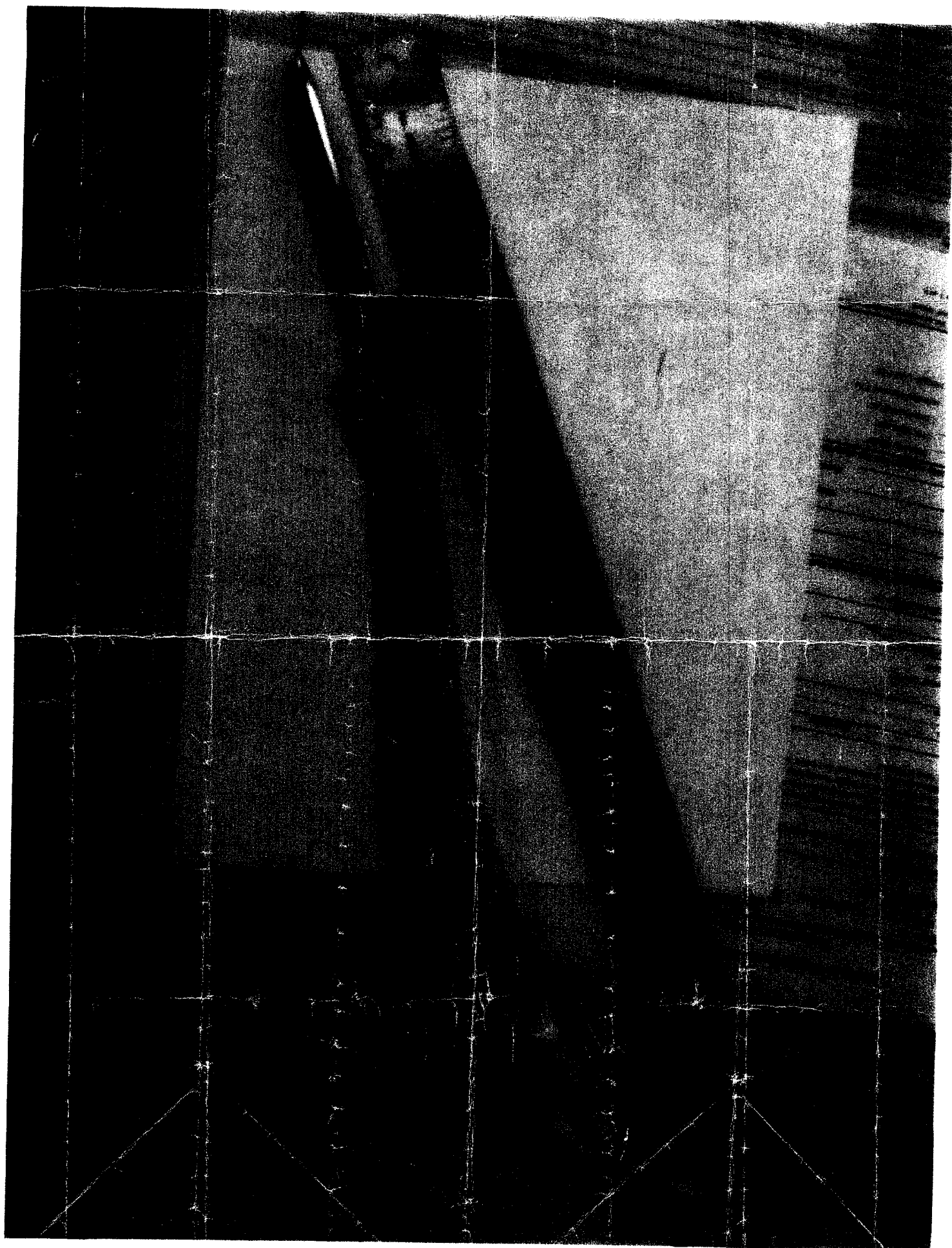
ADMINISTRATIVE REVIEW / DATE _____

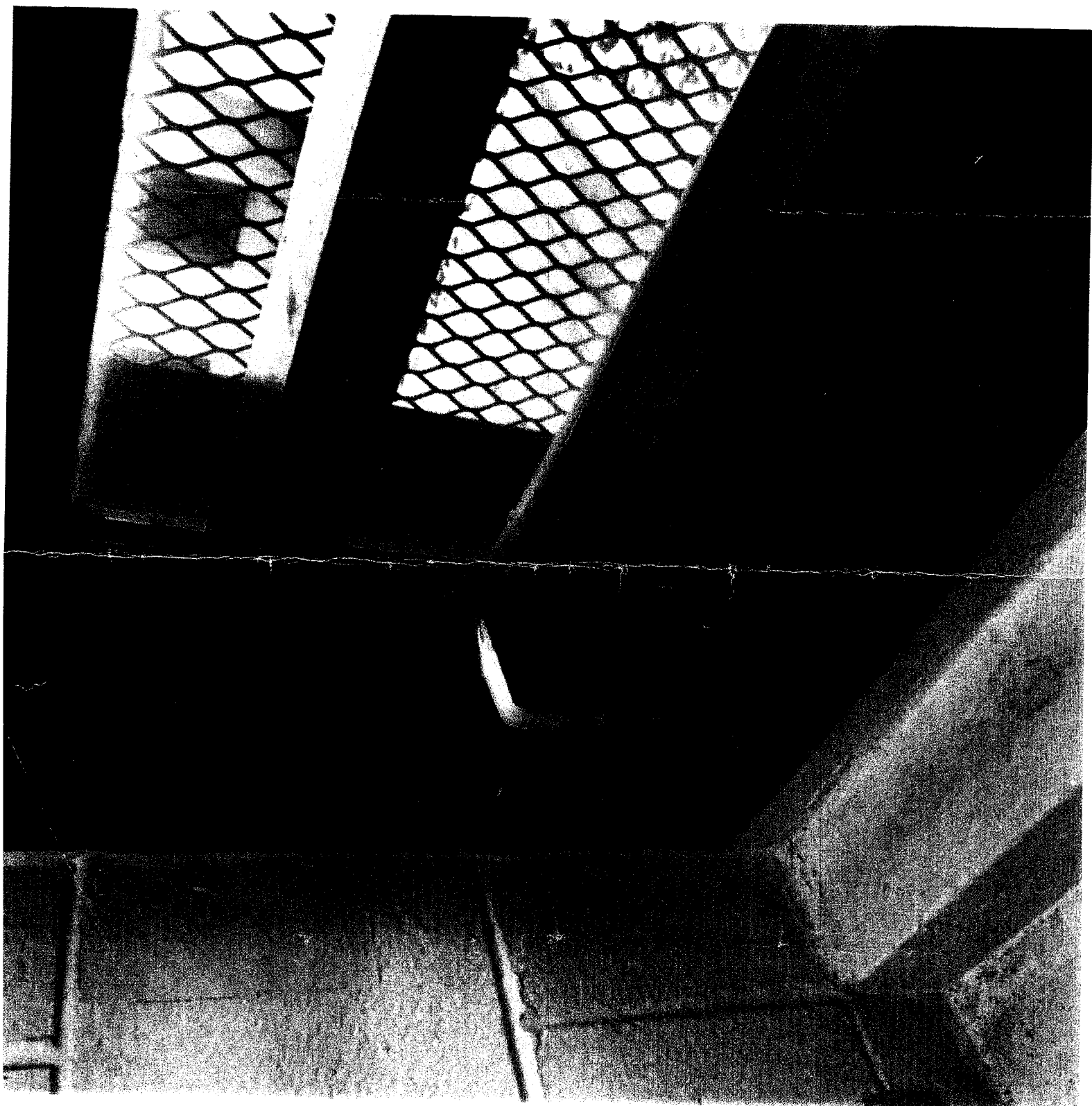
DISCIPLINARY HEARINGS OFFICER / UNIT DISCIPLINARY TEAM

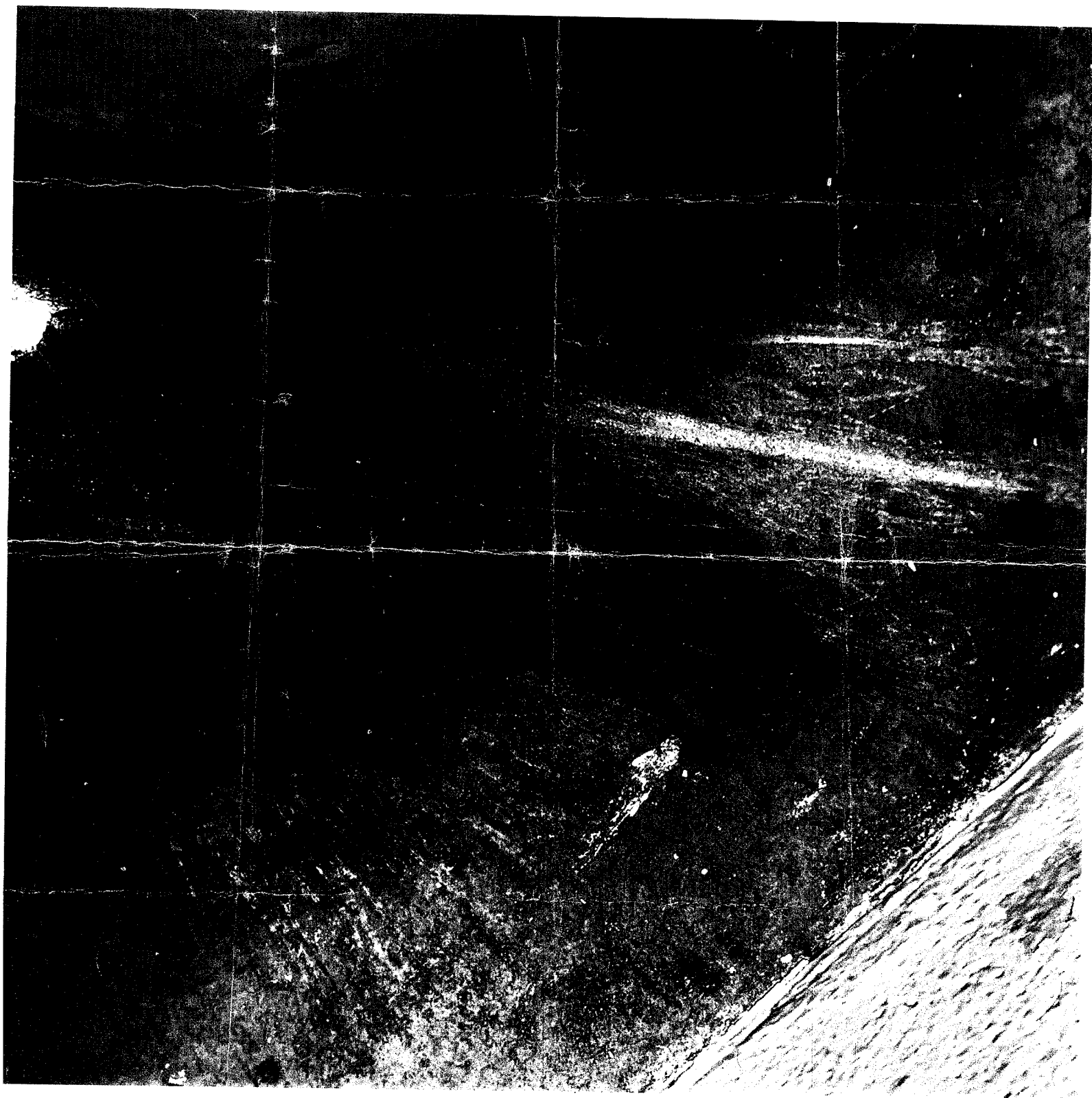
I understand, that I may appeal the decision of the Disciplinary Hearings Officer to the Warden. In order to file an appeal, I must submit a completed appeal form to the Disciplinary Hearings Officer within 15 days from today.
☒ I DO WISH TO APPEAL (Major decisions only) because (1) there is insufficient evidence and documentation to support the finding; (2) applicable disciplinary procedures were not followed; (3) the sanction(s) imposed are not proportionate to the rule violation(s).
☐ I DO NOT WISH TO APPEAL

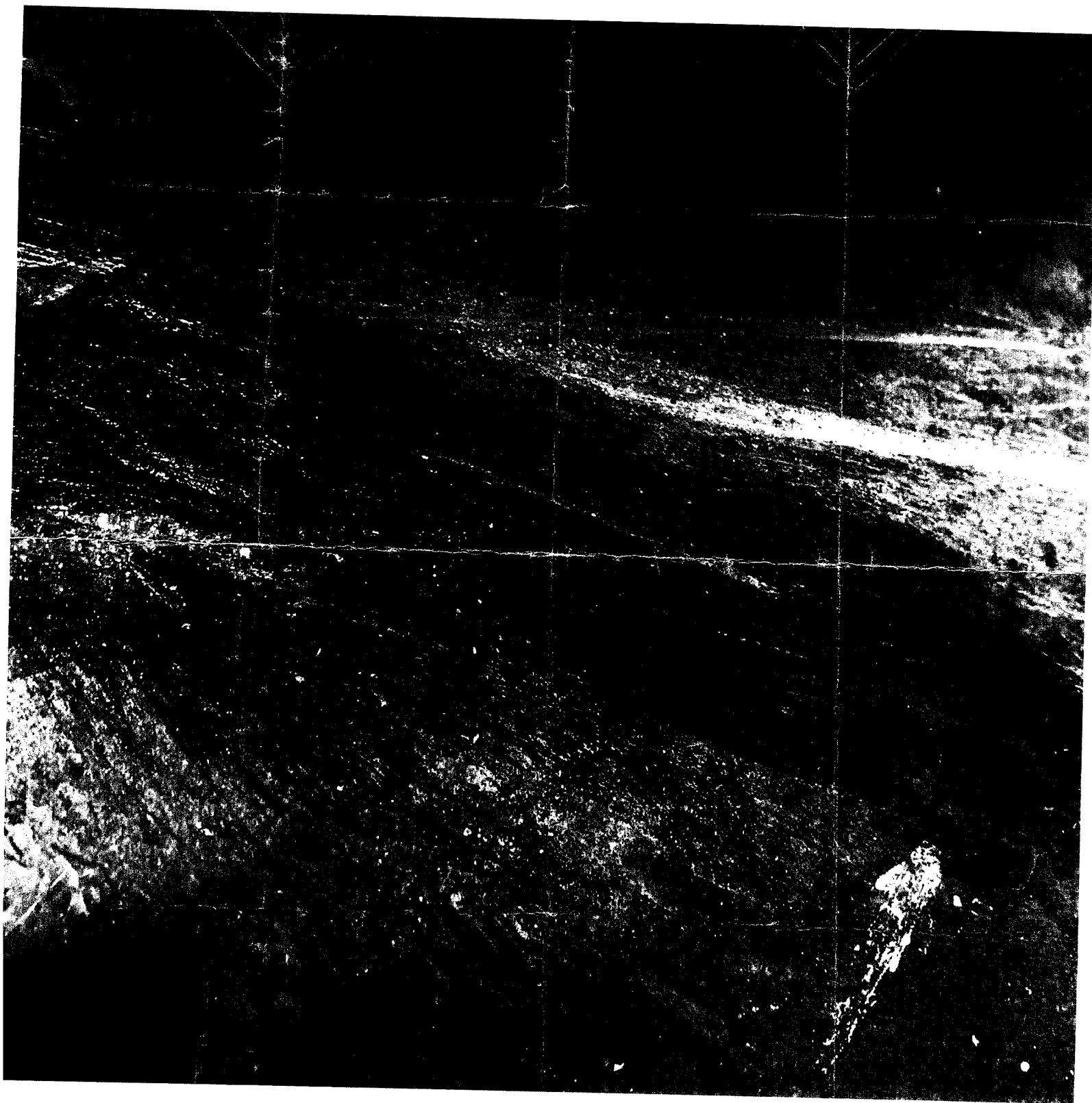
Inmate's Signature / ID#: _____

Copies to: Records (White) Parole Board-Majors only (Yellow) Housing Unit (Pink) Inmate (Goldenrod)









STATE OF MONTANA DEPARTMENT OF CORRECTIONS

MSP ☒ MWP ☐ CONTRACT FACILITY: _____

RECEIVED 11



COPY

Disciplinary Appeal

(major infractions only)

DISCIPLINARY

Inmate's Name: Whitford, Makueya, Pee ID # 3013941
 Date: 12/14/21 Infraction(s): 4102 - Possession of Weapon
 Disciplinary Hearing Decision: Guilt 30 Days Det. 1st 7 Days 02/06/2022
Instructions: Document why one, two, or all three of the following apply and submit it to the DHO or DHI.

1. There was no evidence or documentation to support the decision. From what I seen in the pictures and know from being in the cell, that shank was round/cylindrical whereas those markings on the floor (the one that weren't old) were from a flat object. No reliable confident info.
2. Required disciplinary procedures were not followed. Due Process. 24 hr notice. Photos, requested documentation, general summary of confidential info connecting me to the weapon, etc. Due Process. Access to Policy, procedures, law, and legal materials.
3. The sanction(s) is excessive. Most people are getting 15 days or so for this type of infraction and I haven't had a single write up for a long long time. Approx. 9 months +/-.

[Signature]
 Inmate Signature

12/15/21
 Date

See OSR and Hearing Record

WARDEN OR DESIGNEES RESPONSE**Warden or designee:**

Is there sufficient evidence and documentation to support the finding?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
Is there substantial compliance with applicable disciplinary procedures?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
Is the sanction(s) imposed proportionate to the rule violation(s)?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>

Decision:

- ☒ **Affirm.** I uphold the decision of the DHO and the sanction(s) imposed.
- ☐ **Dismiss.** I disagree with the actions of the DHO and dismiss the infraction.
- ☐ **Modify.** I uphold the decision of the DHO, but the sanction(s) imposed or infraction level shall be:
- ☐ reduced sanction or level to: _____
- ☐ suspended sanction(s) for: _____

Written justification for the action taken above: evidence support finding



COPY

[Signature]
 Warden or Designee Signature

1/13/22
 Date

OFFENDER/STAFF REQUEST (OSR) FORM

From

TO: Disciplinary Johnson

(Name and title of staff person)

DATE: 12-14-21

TO

NAME: MR. Whitford, M ID#: 3015941 FACILITY: MSP UNIT: R44

CELL/ROOM: # L-C-5

SUBJECT: (Briefly state your question and or concern and the solution you are requesting. Your failure to be specific may result in no action being taken. If necessary you may be interviewed in order to successfully respond to this request)

Can you please double check my credit for time served. I've been in pre-hearing and CDC for 11 days now, not 7. And you only gave me credit for 7 of those 11 days. I was on investigation for 5 days before they wrote me up. Can I get credit for time served for the whole time I've been in here, please? And Thank you.

Also, can I get copies of those photo's please? And thank you.

STAFF RESPONSE: (for staff use only)

You are correct. I will change your OUT DATE to 01/01/2022

☐ Addressed Verbally

☐ Unanswered - violation of policy

D.C. [Signature]
(Staff Member Signature)

D/HO
(Job Title)

12/22/21
(Date)

CLASSIFICATION SUMMARY

Name: Whitford, Makueeyapee MSP/DOC#: 3015941 Facility/Unit: HSU1

Type of Classification: Special Classification Date: 12/15/2021 Next Review Date: 5/30/2022

Current Custody: CLOSE Current Assignment: Labor Pool-801

Final Custody: ADSEG Final Assignment: 99999 - Unassigned

Parole Eligibility Date: 6/8/2038 Discharge Date: 2/28/2074

Detainer/Warrant/Notification: ☐ Yes ☒ No State/County: _____

Separation Needs: ☒ Active ☒ Inactive ☐ Initiate ☒ Remove

Atypical: ☒ Yes ☐ No Assaultive/Single Cell/STG
Explain if other

STG Review: ☐ Yes ☒ No

Override: ☐ Yes ☒ No ☐ Continue Override Factor: CHOOSE ITEM

Confidential Information: ☐ Yes, in: _____ ☒ No

PREA: ☒ Yes, Date: 7/19/2016 ☐ No Emergency Contact Valid: ☒ Yes ☐ No

MORRA RT Date: 11/21/2019 MORRA Risk Level: Very High

TREATMENT STATUS

	Type of Referral	Screened/Waiting	Active	Incomp.	Complete
SOP I Tx	Choose Item	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
SOP II Tx	Choose Item	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
CD Tx: ITU / ASAM 3.5	Assessment Need	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
MENTAL HEALTH	Choose Item	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
ANGER MANAGEMENT	Choose Item	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
EDUC. / GED / HiSET	Choose Item	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
COMMUNITY PLACE	Choose Item	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
PARENTING	Choose Item	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
COG. / BEHAVIORIAL	Assessment Need	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
OTHER:	Choose Item	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>

#342 CD ITU : #143 CCP Skills group: #75 AM

RECEIVED
Classification & Placement
Office

Admin Review / Special Committee Signature Date: _____

Appeal: ☒ Yes ☐ No

Classification Officer: Sgt. Machler Unit Manager: UM A. Graham

Inmate Signature: [Signature] Date: 12-16-2021

CLASSIFICATION INSTRUMENT

-Page 1-

Name: Whitford, Makueeyapee MSP/DOC #: 3015941 Unit: HSU1

1. Severity of Institutional Misconduct (rate the last 3 years)

<input checked="" type="checkbox"/>	Category 1 Report(s)	12/8/21-4102: 2/21/21-4111: 2/10/21-4111: 2/9/21-4108: 2/6/21-4111 10/20/20-4111: 10/17/21-4111:10/8/20-4108: 10/1/20-4111(X2) (/17/20- 4111: 9/9/20-4111:2/11/20-4111: 1/21/20-4108: 1/21-20-4111(X2) 5/6/19- 4111:4/25/19-4111: 3/10/2019-4111: 1/8/19-4111	6
<input type="checkbox"/>	Category 2 Report(s)	2/1/21-4235; 9/29/20-4235:7/27/20-4235: 1/21/20-4235 (X2): 4/23/19- 4235 2/17/19-4235	3
<input type="checkbox"/>	3+ Category 3 Reports		1
<input type="checkbox"/>	No Violations within last 3 years		0

2. Most serious current Conviction, Detainer or Warrant

<input checked="" type="checkbox"/>	Highest Severity	Deliberate Homicide	6
<input type="checkbox"/>	High Severity	Assault with Bodily Fluid	5
<input type="checkbox"/>	Moderate Severity		1
<input type="checkbox"/>	Low Severity		0

3. Escape History (rate last 3 years)

<input type="checkbox"/>	Escape or attempted escape from a secure facility (WRC classified secure)	6
<input type="checkbox"/>	Escape/walk away from PRC, TSCTC	4
<input type="checkbox"/>	Walk away from work release or monitoring program	2
<input checked="" type="checkbox"/>	No violations within last 3 years	0

4. Severity of Felony Convictions within the Last 7 Years (do not include current conviction)

<input type="checkbox"/>	1+ Highest Severity or 3+ High Severity	4
<input type="checkbox"/>	1-2 High Severity	3
<input type="checkbox"/>	0 Highest/High severity with 1+ Moderate Severity	1
<input checked="" type="checkbox"/>	0 Highest/High/Moderate Severity with only Low Severity	0

5. Number of Category I or II Rule Violations, Predatory/Assaultive Behavior (rate last 3 years)

<input checked="" type="checkbox"/>	3+ Category I or II Reports	12/8/21-4102: 2/21/21-4111: 2/10/21-4111: 2/9/21-4108: 2/6/21- 4111 10/20/20-4111: 10/17/21-4111:10/8/20-4108: 10/1/20- 4111(X2) (/17/20-4111: 9/9/20-4111:2/11/20-4111: 1/21/20-4108: 1/21-20-4111(X2) 5/6/19-4111:4/25/19-4111: 3/10/2019-4111: 1/8/19-4111:2/1/21-4235; 9/29/20-4235:7/27/20-4235: 1/21/20- 4235 (X2): 4/23/19-4235 2/17/19-4235	4
<input type="checkbox"/>	1-2 Category I or II Reports		2

☐

0, No Category I or II Reports 0

Custody Score based on items 1-5: 7-9 Medium Restricted / 10-14 Close / 15+ Maximum	16
---	----

		Score 1-5
6.	Number of Disciplinary Reports (rate last 6 months)	
<input type="checkbox"/>	3+ Reports or Return from Community Placement for disciplinary reasons _____	4
<input checked="" type="checkbox"/>	1-2 Reports <u>12/8/21-4102</u> _____	2
<input type="checkbox"/>	No Major/Severe Reports _____	0
7.	Performance in Recommended Treatment/Education Programs	
<input type="checkbox"/>	Non-Compliant _____	4
<input checked="" type="checkbox"/>	Waiting for treatment / currently enrolled _____	0
<input type="checkbox"/>	All recommended programs completed _____	-1
8.	Institutional Adjustment / Work Performance (rate last 6 months)	
<input type="checkbox"/>	Poor ratings from both Work and Housing Unit Team _____	2
<input type="checkbox"/>	1 Poor rating from either Work or Housing Unit Team _____	1
<input checked="" type="checkbox"/>	Positive ratings from both Work and Housing Unit Team _____	0
<input type="checkbox"/>	Positive ratings from both Work and Housing Unit Team for 3 years _____	-1

CLASSIFICATION INSTRUMENT

-Page 2-

Name: Whitford, Makueeyapee MSP/DOC #: 3015941 Unit: HSU1

9. Sentence Remaining (total of all consecutive sentences)

Time Remaining: 52 years 2 months

☐ Sentenced prior to April 12, 1995 ☒ Sentenced after April 12, 1995
☐ Designated Dangerous Offender (multiply x 2)

<input type="checkbox"/> 30+ years/life sentence	<u>Score</u> 2	<input checked="" type="checkbox"/> 30+ year sentence/life sentence	<u>Score</u> 5
<input type="checkbox"/> 11-29 years	1	<input type="checkbox"/> 11-29 year sentence/total of consecutive	1
<input type="checkbox"/> 1-10 years	0	<input type="checkbox"/> 1-10 year sentence/total of consecutive	0

TOTAL SCORE Items 6-9: 7

Total Points Item 1-5: 16 **Total Points:** 23

Custody Based on Item 1-5: Adseg **Custody Based on Total Points:** Adseg

Preliminary Custody Level: CLOSE **Recommended Custody Level:** ADSEG

CUSTODY SCORE BASED ON ITEMS 1-5	Medium Restricted 7-9	Close 10-14	Maximum/Ad Seg/Ad Seg Restricted 15+
TOTAL POINTS SCALE - If inmate scores less than 7 points on Risk Items 1-5, use Total points to designate custody			
Minimum/Unrestricted 0-3	Minimum/Restricted 4-8		
Medium/Unrestricted 9-11	Medium/Restricted 12-16		
Close 17-22	Maximum/Ad Seg/Ad Seg Restricted/Death Penalty 23+ points		

Override Factors:

Special Management	<input type="checkbox"/>	Psychiatric / Suicide Risk	<input type="checkbox"/>
Medical	<input type="checkbox"/>	Escape Threat	<input type="checkbox"/>
Detainer	<input type="checkbox"/>	Investigation Pending	<input type="checkbox"/>
Exemplary Institutional Adjustment	<input type="checkbox"/>	Adjustment Problem / Violence Threat	<input type="checkbox"/>
Court Ordered	<input type="checkbox"/>	Inmate Need	<input type="checkbox"/>
Institutional Need	<input type="checkbox"/>		

Final Custody Level: ADSEG

Comment from CM or Designee:

This is a special reclass for Ad-Seg custody, Inmate Whitford was found guilty 12/8/21-4102 Possession of a weapon (shank). Inmate Whitford has been found guilty of 16 staff assaults, 7 threatening staff, 2 conspiring / attempting to assault staff and 1 possession of a weapon in the last 3 years. Inmate Whitford scores 16 points on items 1-5 Ad-Seg custody. Inmate Whitford has been found guilty of 1 major rule infraction this review period. Inmate Whitford is treatment compliant, has active separation needs, has no detainers or warrants and is A-typical Designated. Inmate Whitford has a current Morra and Prea assessment. Inmate Whitford is not parole eligible until June 2038. HSU-1 UMT recommends inmate Whitford be placed as scores Ad Seg custody.

Comment from UM or Designee:

I agree with the comments above Inmate Whitford has been found guilty of 16 staff assaults and 7 threatening staff infractions in the last 3 years, On 12/8/21- inmate Whitford was found guilty of possession of a weapon. Inmate Whitford has continued to show he can not be housed in a general population setting with out a serious risk of violence to staff. Recommend inmate Whitford be placed Ad Seg custody as scores.

OFFENDER/STAFF REQUEST (OSR) FORM

TO: DISCIPLINARY

(Name and title of staff person)

DATE: 12-16-21

NAME: MR. Whitford, M ID#: 3015941 FACILITY: MSP UNIT: RH4
CELL/ROOM: # L-C-5

SUBJECT: (Briefly state your question and or concern and the solution you are requesting. Your failure to be specific may result in no action being taken. If necessary you may be interviewed in order to successfully respond to this request)

So... I've been in the Detention Block on investigation, pre-hearing confinement, and now Detention for 13 days today. 30 days will be on January 2nd, 2022. Yet, I was only given 7 days for credit for time served and given a 30 day sanction that puts me at January 6th 2022. Four days over the 30 day limit. So, exactly how is that going to work? I thought you guys can only put people on the detention block for 30 days? I asked for four days that I didn't get to be credited to me. If that is done it wouldn't interfere with the 30 day limit that I'm suppose to be in here?

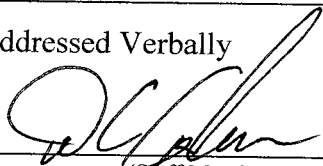
Also, I need all of the OSR's that I sent for my records. Thank you,

STAFF RESPONSE: (for staff use only)

Out Date has been changed to 01/06/2022

☐ Addressed Verbally

☐ Unanswered - violation of policy



(Staff Member Signature)

DHO

(Job Title)

12/22/2021

(Date)